

2823 AF

PATENT

IN THE UNTIED STATES PATENT AT	ND T	'RADEMARK	OFFICE
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In re application of:

Liu et al

Serial No.

10/043,734

Group No.:

2823

Filed:

Jan. 9, 2002

Examiner:

Khiem D. Nguyen

For:

Method and Apparatus for Determining Two Dimensional Doping Profiles with SIMS

Mail Stop: Appeal Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Applicar	nt hereby	appea	ls to the E	oard from	n the decisi	on of the P	rimary Exa	ıminer maile	d <u>Jan.</u>	21,2004	finally
rejecting claims _	1 - 6	and	8 - 20	<u>_</u> ·							

The item(s) checked below are appropriate:

- 1. STATUS OF APPLICANT
 This application is on behalf of
 - other than a small entity.
 - □ a small entity.

A verified statement

- □ is attached.
- □ was already filed on _____
- 2. FEE FOR FILING NOTICE OF APPEAL

Pursuant to 37 C.F.R. 1.17(e) the fee for filing the Notice of Appeal is:

□ small entity

\$165.00

 \boxtimes

other than a small entity

\$330.00

Notice of Appeal fee due:

\$ 330.00

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

deposited with the United States Postal
Service filed by first class in an envelope

addressed to: Mail Stop: Appeal, Commissioner

for Patents, P.O. Box 1450, Alexandria, VA 22313-14

Kathy Dixon

Date: April 21, 2004

04/26/2004 MAHMED1 00000108 10043734

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330.00 OP

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3.	EXTENSION	OF TERM

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NOTE: The time periods set forth in 37 C.F.R. 1.191 are subject to the provision of §1.136 for patent applications. 37 C.F.R. 1.191(d). (But see 37 C.F.R. 1.645 for extension of time in interference proceedings and 37 C.F.R. 1.550(c) for extension of time in reexamination proceedings).

(complete (a) or (b), as applicable)

The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(a) Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:

Extension (months)	Fee for other than small entity	Fee for small entity
one month	\$ 110.00	\$ 55.00
two months	\$ 420.00	\$210.00
three months	\$ 950.00	\$475.00
four months	\$1,480.00	\$740.00

Fee \$

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

	An extension for		_ months has already been secured. The fee paid the								erefor
	of \$	is deducte	d from	the t	total	fee c	lue fo	r the to	tal montl	ns of ext	ension
	now requested.				_	_			_		

Extension fee due with this request \$_____

or

- (b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
- 4. TOTAL FEE DUE

The total fee due is:

Notice of Appeal fee \$ 330.00 Extension fee (if any)\$_____

TOTAL FEE DUE: \$ _ 330.00

- 5. FEE PAYMENT
 - Attached is a Credit Card Payment Form in the sum of \$330.00
 - ☐ The Commissioner is hereby authorized to charge Deposit Account No. the amount of \$0

A duplicate copy of this transmittal is attached.

6. FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, 1065 O. G. 31-33.

If any additional extension and/or fee is required, charge Deposit Account No. 50-0484 (a duplicate copy of this letter is enclosed)

AND/OR

If any additional fee for claims is required, charge Deposit Account No. 50-0484 (a duplicate copy of this letter is enclosed)

Signature of Practitioner

Randy W. Tung (type or print name of attorney)

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